

2006

Progress Report on Targets for Children's Preventive Health

As part of the Arizona School Readiness Action Plan



Arizona Health Care Cost Containment System

Anthony D. Rodgers, Director

Prepared by the Division of Health Care Management
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All children in Arizona enter first grade safe,
healthy and ready to succeed.

– *The Vision of the Arizona School Readiness Action Plan*



The first years of life are critical to the long-term health and well-being of children. A growing body of research links early childhood experiences with later cognitive, social, emotional and physical health and development. By intervening early, providers and parents can influence children's health and development, including their readiness to learn, and reduce the risk of many adult diseases.¹ Regular physical exams, developmental assessments, vision and hearing screenings and preventive services such as immunizations and dental care help ensure that children are healthy and able to focus on learning.

By offering low-income families and children access to health care and a regular point of contact, the Arizona Health Care Cost Containment System (AHCCCS) is uniquely positioned to provide high-quality, comprehensive preventive services that help assure the healthy development of children.

AHCCCS became the first statewide Medicaid managed-care system in the nation in 1982, and currently serves more than 1 million members through a variety of programs. The majority of AHCCCS members are served through the acute-care program, which delivers services through nine publicly and privately operated health plans.

¹ Halfon N, Inkelas M, Abrams M, Stevens G. Quality of Preventive Care for Young Children: Strategies for Improvement. New York, NY. The Commonwealth Fund, May 2005.

Children covered under Medicaid are eligible to receive a comprehensive package of preventive and other services known as EPSDT, or Early and Periodic Screening, Diagnosis and Treatment. In Arizona, children covered under the State Children's Health Insurance Program, known as KidsCare, may receive the same EPSDT services. These services include a comprehensive health and developmental history, including physical, nutritional and behavioral health assessments; a comprehensive physical examination; appropriate immunizations according to age and health history; laboratory tests, including blood lead screening at 12 and 24 months and testing for anemia; appropriate vision, hearing and speech assessments; an oral health screening and regular dental care; and parental health education and guidance. EPSDT also covers necessary treatment of any problems found during checkups.



This progress report is based on measurements of certain preventive health services using the Health Plan Employer Data and Information Set (HEDIS). Developed by the National Committee for Quality Assurance (NCQA), HEDIS is the most widely used set of performance measures in the managed care industry. One of the HEDIS criteria for selecting members to be included in the analyses is that they be continuously enrolled for a minimum period of time with one health plan. Thus, the results do not include all children covered under AHCCCS, but represent a significant portion.

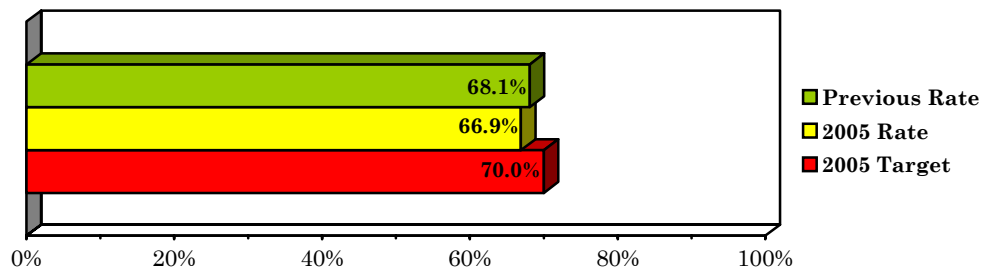
The results on the following pages compare rates of children's preventive services with school readiness targets and other goals, and with previous measurements. The first three measures represent AHCCCS targets that are part of the School Readiness Board's five-year action plan. The last two areas are additional measures for which AHCCCS has set goals. The rates include children who are eligible for AHCCCS under Medicaid and those who are eligible under KidsCare.

For more information about AHCCCS or how these measurements were obtained, go to <http://www.azahcccs.gov>. The Dental Visits Performance Improvement Project and Acute Care Performance Measure reports can be accessed under Studies. For more information about the Governor's Five-year School Readiness Action Plan, go to <http://www.governor.state.az.us/cyf>.

School Readiness Board Targets

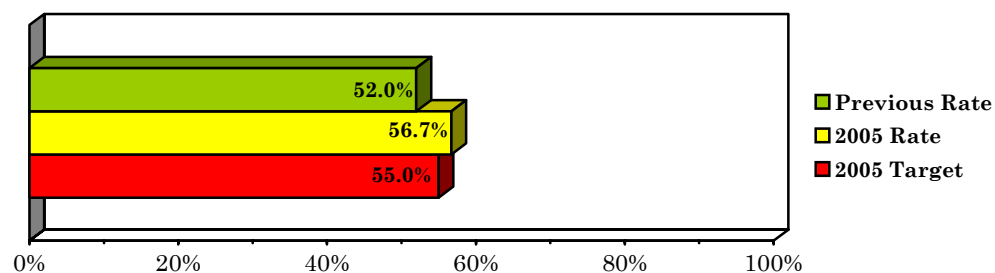
Well-child checkups, birth to 15 months (6 or more visits)

The rate for well-child visits in the first 15 months of life declined slightly, and is short of the target of 70 percent. However, it should be noted that, compared with other states, Arizona's rate for this measure is among the highest in the nation.²



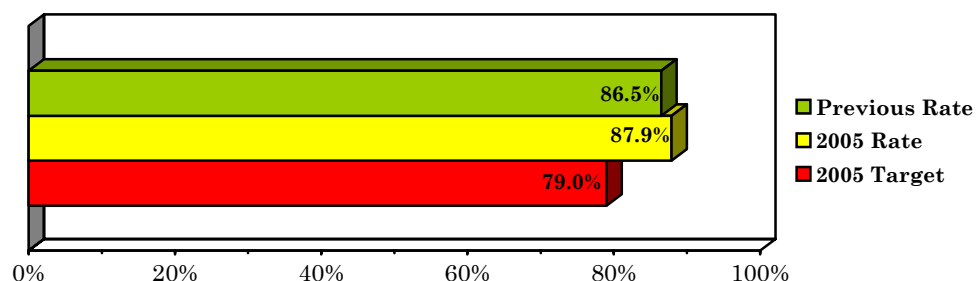
Annual well-child checkups, 3 through 6 years

The rate for well-child visits in the third, fourth, fifth and sixth years of life increased significantly, and exceeded the target.



Children's Access to Primary Care Practitioners (ages 1 through 6)

The rate of children's access to PCPs among children ages 1 through 6 increased, and is well above the target.

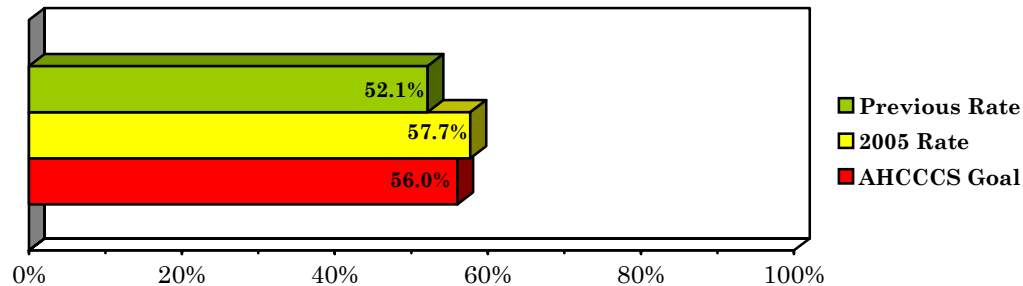


² NCQA has reported that, in 2004, the best-performing (90th percentile) Medicaid health plans nationally achieved an average of 63.2 percent for well-child visits in the first 15 months of life.

AHCCCS Goals

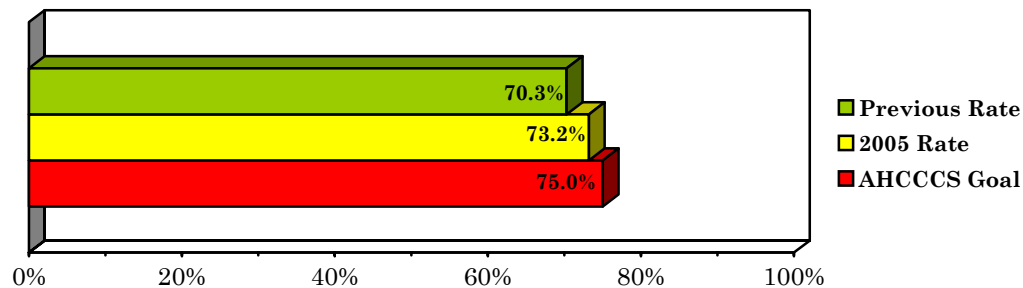
Annual Dental Visits (3 through 8 years)

The rate of annual dental visits among children ages 3 through 8 increased substantially, and exceeded the AHCCCS goal.



Childhood Immunizations by 24 months (4:3:1:3:3 Series)

The rate of childhood immunizations for the combined five-antigen series increased, but is slightly under the AHCCCS goal.



Note: Rates for 2005 are based on the measurement period ending Sept. 30, 2004, except Childhood Immunizations, which is based on the measurement period ending Sept. 30, 2005. The Previous Rate is based on the most recent prior measurement.



Progress on Other Initiatives:

Parental Evaluation of Developmental Status (PEDS): In partnership with the SRB and Arizona Academy of Pediatrics, AHCCCS and its contracted health plans have begun implementing this screening tool to identify possible developmental delays in young children.

Healthy Weight. In 2005, AHCCCS implemented the Childhood Obesity Medical Guideline to improve education and treatment of children who are, or are at risk of, becoming overweight, through healthy eating, physical activity, behavior management and support.